United States Bankruptcy Court

Eastern District of Pennsylvania

In re:

JAMES THOMAS MC COOE

: Case No.: 17-15738REF

James Thomas Mc Cooe

: CERTIFICATION OF BUSINESS DEBTOR

REGARDING MONTHLY EPORT

I, <u>James Thomas McCooe</u> being of full age and duly sworn upon my oath, depose(s) and say(s):

- 1. I am the business Debtor(s) in the above referenced matter.
- 2. I have completed and attached a Monthly Financial Report for the month of

3. All of the information in the Monthly Financial Report is complete, true and correct to the best of my knowledge, information and belief.

This certification and all attachments shall be filed with the Clerk of the United States Bankruptcy Court, the United States Trustee and the Chapter 13 Standing Trustee in accordance with Section 1304 and Section 704(8) of the United States Bankruptcy Code.

Date:

Debtor

N THE MATTER OF:	Case No. 17-15738-ref
ames Thomas McCooe	PETITION FILED: 8-25-17
dM62 11/04/62 11 6600	MONTHLY REPORT NO.
DEBTOR IN POSSESSION	MONTH ENDED 6/21/2018
ALL ITEMS MUST BE ANSWERED U	SING "NONE" OR N/A WHERE APPROPRIATE
CHAPTER 13 MONTHLY REPORT FO	OR INDIVIDUALS ENGAGED IN BUSINESS
1. Cash on Hand (on filing date, or there	eafter, from prior reporting period) 278,50
2. Receipts during Report Period:	
a. Salary and Commissions	15,02500
b. Interest or Dividend Income	
c. Real Estate Rental	NA
d. Other (Describe-Schedule A)	NA
TOTAL RECEIPTS	15,695,01
3. Disbursements:	
a. Taxes – IRS	NA
b. Taxes-State, including any	NA
sales tax due	a / A
c. Taxes- Real Estate	- OYH
d. Taxes- Other	
e. Utilities	558.00
f. Mortgage(s) or Rent(s)	2800.00
g. Insurance premiums (list type)	Auto 383.65 - Cability 90.
h. Food	· · · · · · · · · · · · · · · · · · ·
i. Medical	NA
j. Car loan	
k. Automobile expenses	e e

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CASE NO. 17-15738- ref MONTH ENDING 6/2/10/
1. Clothing
m. Gifts – donations (Schedule B)
n. Tuitions (Schedule B)
o. Other (Describe)
TOTAL DISBURSEMENTS
4. Balance at end of reporting period [(1-2) - 3]
Are you paying all your debts (post filing) as they are incurred? If not, list outstanding obligations and amounts due at end of current period on Schedule C.
6. Is all insurance paid up-to-date?
Debtor in Possession Checking Account(s):
NAME, LOCATION AND NUMBER(S)WELLS Fargo
BRANCH_ Easter
Debtor in Possession Savings Account(s) and Investments, including IRA's, Keogh, Pension:
DESCRIBE:
BRANCH:
SCHEDULE A
(2)(d) Other:
SCHEDULE B
Gifts - donations/Name(s) of recipient(s):
Tuition(s) list name and school(s):

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MONTH ENDING

SCHEDULE C

Outstanding obligations: (List payee and date incurred)

I DECLARE THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE AND CORRECT. I FURTHER CERTIFY THAT ALL TAX REPORTS OR RETURNS WHICH BECAME DUE DURING THE REPORTING PERIOD HAVE BEEN FILED AND ALL REQUIRED PAYMENTS MADE.

SIGNATURE OF DEBTOR(S)

JUNE / 1/2018